

**In The Specification:**

Please amend the paragraph beginning at line 20 of page 13 as follows:

--The sealing valve 20 is formed of an elastic material to be semispherical, and is arranged to air-tightly fit into the branch tube portion 13 and be secured in the branch tube portion 13 with the cap 30. On an upper surface (top portion) of the sealing valve ~~[[10]]~~20, a concave portion 20a is formed for receiving an orifice portion 401 of a lock type syringe 400. The concave portion 20a has a valve hole 20b running therethrough vertically.--

Please amend the paragraph beginning at line 14 of page 18 as follows:

--In the mixed injection tube 1 of the embodiment shown in Fig. 1 and the modified mixed injection tube 1 shown in Fig. 2, the valve hole 20b or 21b is always pressed and hermetically sealed by an elastic force of the sealing valve 20 or 21 and a fastening pressure applied by the cap 30, as described above, thereby preventing leak of blood or drug solution. Moreover, by screwing the collar 402 of the syringe 400 and the screwing piece 30d of the sleeve portion together, i.e., locking them, the orifice portion 401 of the syringe 400 can press and deform the sealing valve 20 or 21 without running through the valve hole 20b or 21b of the sealing valve 20 or 21, thereby opening the valve hole 20b or 21b. Thus, in this state, it is possible to inject blood or drug solution in the syringe 400 into blood or drug solution in an infusion circuit and, if necessary, to extract blood or drug solution in the infusion circuit into the syringe 400. Furthermore, when the screwing of the syringe 400 and the sleeve portion 30c is released, the sealing valve 20, ~~21~~ is brought back to its original state, i.e., a state where it is semispherical or approximately semispherical, as shown in Fig. 1a or 2, because of resilience of the sealing valve 20 or 21, thereby pressing and hermetically sealing the valve hole 20b, ~~21b~~ with a fastening force from the cap 30 again. Thus, leak of blood or drug solution can be prevented.--

Please amend the paragraph beginning at line 11 of page 24 as follows:

--On the lower surface of the cap member 74, a ridge portion 95 that protrudes downward and a valley portion 96 that becomes concave upward are alternately formed continuously in the circumferential direction in such a manner that the valley portion 96 and

the ridge portion 95 correspond to the ridge portion [[95]]88 and the valley portion [[96]]89 formed on the upper surface of the branch portion 84 of the main body 71, as shown in Fig. 5b. The tip end of the ridge portion 95 is formed to dwindle in size.--

Please amend the paragraph beginning at line 17 of page 27 as follows:

--In the mixed injection tube 1b, when the lock type syringe 400 is screwed with the sleeve portion 73 of the cap member 74, the protruding portion 102 of the sealing valve 72 is pressed downward to be deformed, thereby the small-diameter hole (valve hole) 103 is released from the hermetically sealed state. Thus, while the lock type syringe 400 is screwed with the sleeve portion 73 of the cap member 74, it is possible to extract drug solution and/or inject infusion between the mixed injection tube [[10]]1b and the lock type syringe 400.--

Please amend the paragraph beginning at line 2 of page 28 as follows:

Moreover, when the lock type syringe 400 has been detached from the sleeve portion 73 of the cap member 74, the protruding portion 102 of the sealing member valve 72 goes back to the inside of the sleeve portion 73 of the cap member 74 because of resilience of the sealing valve 72 and the small-diameter hole (valve hole) 103 is also brought back to its original state in which it is pressed and hermetically sealed. Thus, drug solution inside the mixed injection tube 1b cannot leak outside.

Please amend the paragraph beginning at line 1 of page 33 as follows:

--In this mixed injection tube 1c, when the cap member 123 is mounted to the branch channel 135 of the mixed injection tube main body 121, the ridge portion 147 and the valley portion 146 of the engagement portion 137 of the cap member 123 fit with the valley portion 140 and the ridge portion 139 of the engagement groove 138 of the branch channel 135, respectively, in a direction in which the engagement portion [[145]]137 of the cap member 123 fits into the engagement groove 138 of the branch channel 135, i.e., the radial direction.--

Please amend the paragraph beginning at line 10 of 36 as follows:

--The position at which the second protruding stria 181 is provided is set in such a

manner that, when a leading end of a male connection port ~~[[101]]~~401 of a lock type syringe 400 that is screwed with and inserted into the sleeve portion 173 has come into contact with the approximately semispherical ceiling of the sealing valve 162, a tip end of a thread of a female screw structure 403 of the lock type syringe 400 reaches the second protruding stria 181, as shown in Fig. 9. In this embodiment, the second protruding stria 181 is arranged at positions shifted from the protruding stria 174 provided at the top end of the sleeve portion 173 by 90 degrees. In Fig. 9a, 10 and 11, the second protruding stria 181 is shown with broken line below the first protruding stria 174 for convenience of the description, although the second protruding stria 181 does not actually appear in the drawing because it is arranged on the front and rear sides of the drawing.--

Please amend the paragraph beginning at line 25 of page 45 as follows:

--A feature of the connection system 200 of the present embodiment is as follows. The aforementioned connection tool 201 for an infusion circuit is attached to the medical infusion line 202. By pressing and deforming a sealing valve for a medical apparatus, mounted in each connection port of the connection tool, by means of the tip end of the tube of the other medical infusion line ~~[[202]]~~203 or the tip end of the syringe 206, the valve hole can be opened without inserting the tube of the other medical infusion line 202 or the syringe into the valve hole. In this manner, it is possible to connect the tube of the other medical infusion line 203 or the syringe 206 to the medical infusion line 202.--

**In The Drawings:**

Applicant enclosed herewith two replacement sheets of drawings 5a-5b and 12a-12b. The amended Figs. 5a, 5b, 12a, and 12b are identical to the original Figs. 5a, 5b, 12a, and 12b, except that the relative positions between Figs. 5a and 5b and between Figs. 12a and 12b have changed.